

DOCUMENT RESUME

ED 041 322

CG 005 656

TITLE A Guide to Develop Programs for Family Living and Personal Growth.

INSTITUTION Iowa State Dept. of Public Instruction, Des Moines.

PUB DATE 69

NOTE 49p.

AVAILABLE FROM Publications Section, Department of Public Instruction, Grimes State Office Building, Des Moines, Iowa 50319 (\$1.00 per copy)

EDRS PRICE EDRS Price MF-\$0.25 HC-\$2.55

DESCRIPTORS Curriculum Design, *Curriculum Guides, Educational Programs, *Educational Resources, Evaluation, Inservice Education, *Objectives, Orientation, *Program Development, *Sex Education

ABSTRACT

This publication has been designed to augment existing community programs and to initiate sound educational programs which will include the sexuality dimension in the total curriculum, kindergarten through grade 12. It is hoped that it will lend some clarity so such questions as should the schools teach sex education; and if so, what, by whom, how and when? Included in this booklet are: (1) a policy statement; (2) supportive statements; (3) rationale; (4) objectives; (5) program development; (6) orientation and inservice education of staff; (7) evaluation procedures and processes; (8) suggested curriculum guidelines, primary, intermediate, junior high and senior high; and (9) learning resources, primary, intermediate, junior high and senior high, and for the teacher. A glossary of terms concludes this guide. (JK)

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FOR
FAMILY LIVING
AND PERSONAL GROWTH**

STATE OF IOWA • DEPARTMENT OF PUBLIC INSTRUCTION

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FOR
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STATE OF IOWA • DEPARTMENT OF PUBLIC INSTRUCTION

1969

CG 005 656

State of Iowa

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FOREWORD

In response to a growing need expressed by educators and the lay public, the Iowa State Department of Public Instruction is pleased to make this informational guide available to the schools of Iowa.

It is hoped that it will lend some clarity to such questions as Should the schools teach sex education; and if so, what, by whom, how, and when?

Use of this guide at the local level should be based on the needs of the particular community.

This publication has been designed to augment existing community programs and to initiate sound educational programs which will include the sexuality dimension in the total curriculum, kindergarten through grade 12.

PAUL F. JOHNSTON
State Superintendent of Public Instruction

ACKNOWLEDGMENTS

A sincere expression of gratitude is extended to the many people who have been concerned with the production of this publication.

Special recognition is given to the persons named below, who gave so freely of their time and effort in writing this guide.

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POLICY STATEMENT

of the Iowa State Board of Public Instruction on Sex Education in the Schools

Adopted August 15, 1968

We believe that sex education, as a part of family living, should be included and be a definite part of the curriculum in the schools of Iowa inasmuch as they are important agencies in the development of healthy habits of living and moral values. Sex education is herein being described as education for the masculine and feminine roles in society. Parents have a basic responsibility for sex education; the school and certain other community agencies have supplemental roles.

Programs of sex education must be carefully planned toward helping students be responsible members of our society. Formal sex education in the schools is best taught by the classroom teachers and integrated into appropriate courses, with special counseling as needed. The basic materials included should be accurate, handled in a highly professional manner, and integrated with other course materials according to the maturation levels of the children. This instruction should be started in kindergarten and followed throughout all school levels. Students should receive frank and factual answers to their questions.

For the satisfactory implementation of this policy, teachers at all levels should receive appropriate instruction in teaching sex education as a part of family living. The Department of Public Instruction, Institutions of Higher Learning, the Department of Health, the Iowa Medical Society and other agencies can provide assistance in the development of a program.

SUPPORTIVE STATEMENTS

In the interest of providing a wider scope of opinion about the appropriateness of sex education programs in the schools, several statements are included.

. . . that the school curriculum include education for family life, including sex education . . . the family life courses, including preparation for marriage and parenthood, be instituted as an integral and major part of public education from elementary school through high school and that this formal education emphasize the primary importance of family life.—*Sixth White House Conference on Children and Youth, 1960.*

The responsibility of the school in education for family life is no longer a matter of debate. The tasks of the school in supplementing and complementing those of the home and of the social structure in which children and youth are growing and developing their attitudes, character, and capabilities for relating themselves to other people, are now recognized as inescapable in total balanced education.—*Elizabeth S. Force, Director of Family Life, American Social Health Association.*

. . . that the schools accept appropriate responsibility for reinforcing the efforts of parents to transmit knowledge about the values inherent in our family system, and about the psychic, moral, and physical consequences of sexual behavior, and be it further resolved that this be done by including in the general and health education curriculum the physiology and biology of human reproduction beginning at the elementary level and continuing throughout the school years at increasing levels of comprehension, and that the study of venereal diseases continue to be a part of communicable disease education during early adolescence, and be it further resolved that the concept of the family as a unit of society based on mature, responsible love be a continuing and pervasive educational goal.—*Joint Committee on Health Problems in Education, National Education Association and American Medical Association, March 1964.*

. . . create a climate of acceptance for family life education in the schools. Encourage the inclusion of sex education for boys as well as girls in school programs in family life education.—*National Congress of Parents and Teachers, 1965.*

. . . Schools are not giving students an adequate education in sex; too

many teachers give the once-over-lightly treatment—if any treatment at all.—*National High School Youth Conference, February 1966.*

. . . urge schools to assume the responsibility of providing sound sex education including human reproduction as one part of a complete health education program. . . . urge colleges and universities to include family living instruction including sex education in the general education of all students . . . encourage churches, civic organizations, and other community groups to strongly support programs of sex education.—*Resolution, Board of Directors, American Association of Health, Physical Education, and Recreation, March 1966.*

. . . If our aim is adults who will use their sexuality in mature and responsible ways, we cannot begin sex education later than early childhood . . . inasmuch as parents are also entirely unprepared to do the in-depth kind of job that is required, the schools will have to assume the main burden and responsibility for planning and carrying out adequate sex education programs.—*Mary S. Calderone, M.D., Executive Director, Sex Education and Information Council of the U.S., March 1966.*

. . . To assist communities and educational institutions which wish to initiate or improve programs in this area (family life education and sex education), the U.S. Office of Education will support family life education and sex education as an integral part of the curriculum from preschool to college and adult levels; it will support training for teachers and health and guidance personnel at all levels of instruction; it will aid programs designed to help parents carry out their roles in family life education and sex education; and it will support research and development in all aspects of family life education and sex education.—*Harold Howe II, U.S. Commissioner of Education, August 1966.*

. . . Human sexuality is a gift of God, to be accepted with thanksgiving and used with reverence and joy.

Sex education is not, however, only for the young; it is a life-long task whose aim is to help individuals develop their sexuality in a manner suited to their stage in life.

Responsibility for sex education belongs primarily to the child's parents or guardians . . . but some parents desire supplementary assistance from their church or synagogue . . . therefore each community of faith should provide resources, leadership, and opportunities for all ages to grow in the understanding of their roles as men and women in the family and society.—*Synagogue Council, Council of America, the United States Catholic Conference, and the National Council of Churches, June 8, 1968.*

RATIONALE

for a Program of Sex Education

Many parents, leaders in the community, and public school officials feel that the time is past due when a comprehensive program of sex education should be offered in the school curriculum, kindergarten through 12th grade.

The reasons these leaders feel we need this program NOW are provided below. These statements are offered in summary only, in the hope that each planning committee will develop its own comprehensive rationale.

- 1. Children and Youth Receive Most Sex Education from Their Peers, Not Parents.**

Young people receive a large part of their sex information from their friends. This information is often inaccurate and given with overtones of secrecy and anxiety. These so-called "facts" are often couched in a framework of confusion over the full extent of the issues involved. The question of moral values, responsible freedom, and the importance of the value of human personality are seldom conveyed.

- 2. Concerned Parents Feel a Strong Need for Providing Sex Education.**

Many parents are in revolt against the cheap image that sex has taken in our society today. They are not convinced that they can do the WHOLE job of providing accurate factual information about human growth and development. Many parents even question whether or not they are the best source for objective learning of sex information, especially in the teen years. Most parents agree that the school can provide supplemental help in developing moral and ethical values concerning sex attitudes and conduct due to an objective environment for learning.

- 3. Children and Youth Are Asking for Help To Face the Many Problems Related to Sexual Adjustment.**

Earlier marriage and a growing number of teenage divorces present a series of new problems for our society. The various displays of sex symbols constantly expose youth to a variety of stimuli regarding the use and place of sex in life. Because of these many factors in our society, the school needs to assist the home and church in helping youth to be aware of the need to develop

a responsible personal moral code. The personal counseling that should be a part of this program could also help youth face important decisions regarding their sexual behavior.

4. Children and Youth Want Accurate Information Concerning the Normal Development Toward Sexual Maturity.

The advent of puberty is a time when the adolescent is filled with many feelings and emotions that need an explanation. A vast number of youth do not receive sex information from the home and are not a part of a local church where this information may be provided.

Accurate information can help fortify youth against exploitation by others or against the misuses of their bodies. It leads to more wholesome attitudes. We should, however, insure that sex education is accurate and wholesome.

5. The Sex Education Program in the School Provides an Opportunity To Reach Parents and Assist Them With Their Questions.

Many parents are products of a generation where formal sex education was not provided. They admit to being confused about the facts of human growth and reproduction. They often reveal that they hold irrational fears and superstitions about sexual conduct that have been carried over from childhood. A comprehensive program in sex education, kindergarten through 12th grade, could give impetus to a regular program of family life and sex education for parents in the community.

OBJECTIVES

for a Program of Sex Education

Sex education should be an integral part of family life education in the school curriculum.

The following objectives may supply the basis for a sex education program:

1. To provide the individual with adequate information about his own physical, mental, and emotional maturation processes as related to sex.
2. To alleviate fears and anxieties relative to individual sexual development.
3. To develop objective and understanding attitudes toward sex in all of its various manifestations—in the individual, toward himself, and toward others.
4. To give the individual insight concerning his relationships to members of both sexes and to help him understand his obligations and responsibilities to others.
5. To provide enough information about the misuses and deviations of sex as to enable the individual to protect himself against exploitation and against injury to his physical and mental health.
6. To provide a climate for learning and the understanding that will enable each individual to utilize his sexuality effectively and creatively in his several roles, i.e., as a child, youth, spouse, parent, community member, and citizen.
7. To build an understanding of the need for and appreciation of moral and ethical values that are necessary to provide a rational basis for making decisions concerning ALL human behavior.
8. To provide information as to the place of the family in our society and the skills that lead to a responsible home and family life.
9. To provide information and guidance about the emerging social problems that affect family in our society, such as birth control and the population explosion, illegitimacy, early marriage, venereal disease, solo parenthood, divorce, and sexual deviation.

PROGRAM DEVELOPMENT

The development of a curriculum in sex education, as a part of family life education, has become a recognized role of the school. The school should share the responsibility of such education with the home, church, and community. If family life education is to be effective, all facets of the community should become actively involved in the launching of the program. Therefore, it is imperative that school personnel carefully select a committee to assist in planning a new program.

I. Introducing the Program

A. Initial Impetus

1. School personnel may provide the impetus for encouraging the development of the program.
2. Individuals or lay groups within the district may provide the impetus for encouraging the development of the program.
3. No matter what the impetus, the interest should be reported to the school administrators, who should decide what priority is to be given to the development of a program.

B. Administrative Follow-through

1. The superintendent should discuss the need of a program with the administrative staff.
2. The administration and teachers should determine what is already being done in the school in sex education, even though a structured program is not evident.
3. The administration should discuss the feasibility of such an addition to the curriculum with the board of education.
 - The board of education and administration need to decide if a school staff committee should plan and promote the program, or if a lay advisory committee should be used. A lay advisory committee may be helpful.
 - The board of education should place in its minutes the approval of the organizing of a committee to develop a program.
 - Thereafter, the administration should keep the board of education informed on the progress or development of the program.
 - A staff member should be appointed as committee chairman.
4. Reports and action concerning the program should be made available to interested groups.

II. Developing the Program

A. Organizing

1. If a lay committee is organized to assist in the study, emphasize that it is to be an *advisory committee*. A committee could include a cross section of representatives of community groups, parents, and youth.
2. If a lay committee is not used, the community should still be informed of the development of a program.
3. Publicize the concern and interest shown by various groups.
4. A teacher from each grade K-6, and junior-senior high teachers who may teach the subject matter, should be included on the committee.
5. The committee work can be expedited by dividing into subcommittees, such as: curriculum, objectives, public relations, general, etc.

B. Making the Study

1. The first committee meeting could be general in nature to acquaint the members with one another, to discuss the purpose of the committee work, and to structure the sequence of the study.

A suggested way to get the committee members to interact with each other is to show a thought-provoking film such as *Sex Education, U.S.A.** or *Parent to Child, About Sex*.

■ Following the first meeting, it is suggested that the committee work closely with the administration and faculty in developing the rationale and objectives for the program.

■ Committee members should be provided resource items, such as pamphlets, books, etc., for their review.

2. At each subsequent meeting it is suggested that committee members work in subcommittees to discuss issues and topics, reporting to the committee of the whole as to what they discuss and determine about the program.

Some topics for discussion may be as follows:

■ What is an adequate definition of sex education?

■ Whose responsibility is sex education?

■ When should sex education begin?

■ Should sex education be a separate course? Should it be integrated with one or more existing curricula, such as science, health, physical education, social studies?

■ Who should teach the course?

* See bibliography.

- How should the community be involved and informed to support the school program?
 - What should be included in a planned course for sex education—and at what grade or age levels?
 - What is already being done by the church, school, home, and community?
 - What is an appropriate title for the course? Sex Education? Health and Human Development? Family Life Education?
 - What are the objectives of the program?
 - How are the moral values taught along with the physiology of sex?
 - Should parents be given the option of having their children excused from the program?
 - What objections to the program are likely to arise?
 - Should boys and girls be taught together? At what grade levels?
3. At each subsequent meeting it is suggested that the committee of the whole preview films, sets of slides and filmstrips to determine what audiovisual aids are available for the K-12 sequential program and to make recommendations as to grade placement of the instructional materials.

C. Finalizing the Program

1. The administration and/or faculty should develop a suggested sequence of placement of teaching aids, such as charts, films, slides, pamphlets, and books. The committee should discuss this sequential placement, making recommendations for changes or additions.
2. Plans may be made to integrate the new curriculum with one or more of the following curricula: science, social studies, physical education, and health. A suggested format for integration of materials is listed elsewhere in this publication. When necessary and feasible, a separate course in family living and human development could be placed in the junior-senior high school curriculum.
3. The committee should give approval to the program outline with the understanding that the administration and faculty will continue the development of the program.
4. The proposed program should be submitted to the board of education for its consideration and approval.

III. Implementing the Program

- A. Promoting the Program. Implementing the program actually starts when the impetus is first provided for its development; and it continues throughout the period when the program is being developed. This is the time when much of the promotion needs to be done, through informing school personnel and community patrons of the progress of the study. This can be accomplished through administration-faculty meetings, newspaper and radio publicity, and discussions with community groups.
- B. Launching the Program. Some suggested procedures are as follows:
 - 1. Organize a series of inservice meetings with the faculty to develop an understanding of their role and responsibilities with the program and to view the audiovisual materials to be used.
 - 2. Organize public meetings in which some or all of the following could be done: Secure a guest speaker to discuss sex education; view a film for adults to show the need for a sex education program, such as *Parent to Child*, *About Sex* or *Sex Education, U.S.A.*; preview films which will be used in the program.
 - 3. Form panels with members of the committee and present discussions on the program to service clubs, the PTA, church groups, and other community groups.
- C. Follow-through on the Program
 - 1. A few days previous to student viewing of films, filmstrips, or slides, invite the parents to a meeting to have them preview the presentation. This can provide for better parent-child communications about the topics presented.
 - 2. Immediately following an audiovisual presentation during the year, the teacher would submit to the principal, information on lead-in and follow-up questions used. The report might include student questions which might be especially useful to other teachers. This information might be included in a course of study.
 - 3. Provide opportunities for parents to evaluate the program and make suggestions.
 - 4. During the year and near the end of the year, the faculty and administration should evaluate the sequential placement of instructional materials and plan for changes.
 - 5. If a lay committee has been used, a meeting of the committee could be held at the conclusion of the year, to obtain evaluations of the program.
 - 6. Instruction in sex education could be provided in the regular adult education program of the school.

ORIENTATION AND INSERVICE EDUCATION OF STAFF

I. Informing the Public

Members of the committee writing the course of study should be included as presentors to civic groups such as service clubs; PTAs; citizens committees; and organizations of clergymen, doctors and other professional people. Generally speaking, these groups will:

- A. Recognize the need for a program in personal and family living.
- B. Broadly define the scope and emphasis of the program.
- C. Give direction in formulating course objectives.
- D. Discuss the general terms and concepts to be presented.
- E. Lend support to the course as it is introduced into the curriculum.

As the staff representatives attend these meetings and work with these various citizen committees, they will get a general feeling for the type of program which would be best suited to the special needs of their community.

II. Informing the Staff

During the stages of development of the family living program, keep all staff members well informed on the progress of the program. Use bulletins, faculty meetings, departmental meetings, and reports to faculty members by administrators or members of the curriculum committee. Include current bibliographic material and the showing of informational films and filmstrips. Assume that the faculty will study the material, discuss it, and make suggestions for improving the program. This will provide the faculty members with a proprietary interest in the success of the program.

III. Inservice Education

- A. Place the completed course of study in the teachers' hands far enough in advance of the time of actual use so that adequate educational materials may be obtained.
- B. Conduct inservice education meetings at grade or department levels. At these meetings, review the program and materials in terms of the concepts to be presented.
- C. Provide consultant services (from outside or within the school system) prior to and during the school year.
- D. Reassure teachers that, because of community participation

during the development of the course of study, the various groups such as PTA, administrators, clergy, and others will support them as they teach these concepts in the classroom.

- E. Provide for continuous evaluation of materials being used and new materials being produced.

IV. Final Suggestions

The above steps are suggestions only and are not hard and fast rules guaranteed to successfully orient staff members for all programs. These suggestions should be used as they meet the needs of a particular program in a specific school system.

EVALUATION PROCEDURES AND PROCESSES

I. General Comments

The need for continuous evaluation of the program is quite evident. In some cases, evaluation can be very difficult for a program of this type. In general, however, a main criterion for evaluation will be whether or not the program attains the objectives originally designed for it.

II. Program Evaluations

A. Staff

One possible method of evaluating the program within the grade level or within the department would be to hold discussion meetings involving all members of the staff. At these meetings, appoint a recorder to record the comments of the participants. Present these comments to the special committee charged with the evaluation.

B. Parent

Questionnaires could be sent to a random sampling of parents. Tabulate the responses to these questionnaires and give them to the general evaluating committee.

C. Pupil

A representative group of pupils from the sixth through the 12th grade could be interviewed and given an opportunity to evaluate the program in terms of what they feel their needs are in the area of personal and family living. Present a summary of these reactions to the committee charged with the responsibility of evaluating the program.

III. General Evaluation

Some guidelines to follow:

- A. To assist the planning committee, a special evaluation committee composed of teachers, administrators, lay public, and students could be formed to review the program and recommend revisions.
- B. It is likely that some benefits of the program in personal and family living will be discovered. Some of these might be a closer relationship between the school and the community, a better understanding of pupils' problems by both the teacher and the

parents, and the establishment of a better relationship between the adults and the children with regard to discussing these problems in the home, the classroom, and the counseling area.

- C. Try to evaluate not only the materials that are being used at the present time, but also the newly developed materials that are constantly appearing on the market.

SUGGESTED CURRICULUM GUIDELINES

I. PRIMARY

A. Introduction

In these grades, sex education is usually integrated into the existing curriculum. Separate special classes are not practical at this level. Usually this information is considered within social studies, science, or health units. However, each school must decide where such content will best fit into the curriculum. The one danger in this type of planning is that the information becomes so scattered within the curriculum that the effectiveness of the program is reduced. This problem can be avoided by developing a course of study which outlines content in a sequential order by age or grade level. (See bibliography for sources of some curriculum guides.)

Each community is unique; therefore, consideration should be given to the local situation in the development of a program to insure that every boy and girl is offered the information and guidance as needed.

The concepts within the unit outlines should have a developmental approach. For example, childbirth may be considered more than once, but each approach would build upon previous knowledge.

B. Objectives

By the end of the primary level each student should

1. Understand some elementary facts of how living things grow and reproduce.
2. Begin to understand the role of each member of the family.
3. Begin to understand human growth patterns and the usage of correct terminology as it relates to this age level.
4. Have developed a positive self-image and a feeling of self-worth.
5. Be able to discuss his feelings freely with his peers.

C. Content

The following are examples of content which may be useful in developing a local curriculum guide.

1. Meaning and purpose of life continuing from generation to generation.
 - Growth and maturity of plants and animals
 - Reproduction; the life process of plants and animals

- Growth of the fertilized egg; understanding that all babies have mothers and fathers
 - Birth processes of animals and humans
2. Understanding how living things grow.
 - Care of newborn babies; animals and humans
 - Achieving sex identity; clothes, personal appearance, etc.
 - Learning about the human body; use of correct terms when referring to body parts
 3. Family life as an essential part of human growth.
 - The family; how it varies and changes
 - Roles of the family members; doing things together
 - Respect for the privacy of each family member
 - Relatives; the total family organization
 4. New acquaintances outside the home.
 - The neighborhood, school, church, etc.
 - Making new friends; growing up socially
 - Personal health habits; how these affect the individual personally and socially
 - Responsibilities to other people in the community.

D. Illustrative Activities

- Have children bring pictures of themselves as babies. Discuss how they have grown. Make a then-and-now bulletin board display.
- Care for animals in the room. Feed and otherwise care for them. Observe response to care. Rabbits, hamsters, guinea pigs, and baby chicks are examples of animals to use.
- Collect tadpoles or grow eggs in the spring. Watch them develop.
- Visit a farm to see baby animals.
- Bathe a doll-baby.
- Show pictures of babies sleeping, kicking, eating, crying, laughing, etc.
- Find pictures showing responsibilities of the family members.

II. INTERMEDIATE

A. Introduction

The content considered at this level should include a continuation of the topics listed in the primary section. Children at this age are becoming more curious about human growth and are ready for more scientific instruction. These children are moving toward puberty at different rates and need assistance in understanding this important period of their lives. Accurate responses to questions will be essential in preparing them for adolescence. The content may easily be placed within health or science units.

B. Objectives

By the time the pupil finishes this level of learning he should:

1. Understand the importance of health habits.
2. Develop an expanded vocabulary when discussing sexuality.
3. Understand some of the changes which occur during preadolescence; e.g., physical and emotional changes.
4. Begin to appreciate the individual's responsibility and loyalty to his family and society in general.
5. Acquire more information about the creation of life.
6. Understand the influence of his social environment on his sex attitudes and behavior.

C. Content

The following are examples of content which may be of value in developing a local curriculum guide:

1. Reproduction and growth.
 - Production of egg cells within the ovary of the sexually mature female
 - Production of sperms in the testicles of the sexually mature male
 - Fertilization of the egg cell by the sperm
 - Influence of heredity and environment
 - Differences in growth rate; influence of body glands
 - Puberty as a stage of human development; emotions which may accompany this stage
 - The balanced diet and its effects upon the individual
 - Proper body care; influence of grooming and body care upon physical growth and social development
 - The development of "maleness" and "femaleness" as boys and girls mature

2. Family life

- Contributions of each family member to the emotional and physical welfare of the family
- Family patterns; changes of family organizations
- Respect for the privacy of the individual family member
- Communicating between parents and children as a means of avoiding and solving problems within the family

3. Social and emotional maturations.

- Achieving self-respect
- Learning how individual behavior influences others
- Accepting differences in people; respect for individual beliefs
- Friendships with boys and girls
- Learning more about emotions—love, hate, anger, etc.

D. Illustrative Activities

- List physical and social differences between boys and girls.
- Hold classroom discussions using appropriate visual aids.
- Prepare a vocabulary covering physical and emotional growth; involve students in the preparation of the list.
- Conduct panel discussions on such topics as family life, personal goals, personal conduct, differences in physical growth during preadolescence, etc.
- Write autobiographies to illustrate how people do change as they mature.

III. JUNIOR HIGH

A. Introduction

Some of the approaches for presenting a sex education course of study at the junior high school level are as follows:

1. Correlation with other subject areas—science, health, and homemaking
 - a. Presentations in each grade—seven, eight, and nine
 - b. Presentations in two grades, usually grades seven and nine
 - c. Presentation in one grade, usually grade eight
2. Planning special sex education sessions but not correlating these with any certain part of the curriculum

Each local school system should determine how to fit the content into

the total curriculum. Many school curriculums are so crowded that additional material must be integrated into the existing offerings. The same caution applies here as at the elementary level; do not allow the content to become so scattered that the effectiveness of the program is reduced.

Boys and girls at this age will have varying backgrounds in sex information. There also will be a wide range of physical and emotional development. Therefore, topics usually found at the junior high level are (1) adolescent body changes; (2) social development; (3) the family and the adolescent; (4) personal hygiene.

If there has been a developmental approach to sex education throughout the elementary grades, discussions at the junior high school level are easily initiated. If this is the level where sex education is beginning in a particular school system, careful planning will help alleviate embarrassment and reluctance of pupils to participate in class discussions.

B. Objectives

By the time the student leaves this level he should:

1. Understand more about male and female sexual development during adolescence.
2. Understand how the sex drive relates to love and marriage.
3. Appreciate the importance of family ties during adolescence.
4. Have a vocabulary relating to sexual development which can be used without embarrassment.
5. Understand the effective methods of personal cleanliness.
6. Appreciate the values of wholesome heterosexual relationships.
7. Begin to assume responsibility for his own actions; to develop a code of behavior that is harmonious with society in general.
8. Feel that he is accepted and capable of making a worthwhile contribution to society.
9. Acquire information about venereal diseases.
10. Acquire information about the problems of homosexuality and sex deviations.

C. Content

The following are examples of content which may be useful in developing a local school curriculum guide:

1. Important physical changes during adolescence
 - How heredity affects growth rate; chromosomes and genes
 - The male and female reproductive system—conception, pregnancy and birth
 - Problems which occur in connection with adolescent changes—

acne, voice changes, uneven growth, varying rates of body change, seminal emissions, and menstruation

2. Personal hygiene

- Physical changes and their effect upon cleanliness
- Importance of physical exercise, diet, and sufficient rest
- The importance of personal appearance upon the social acceptance of the teenager
- Effect of drinking and drugs upon the relationships of individuals

3. Moving toward maturity requires social and emotional growth during adolescence

- Conflict which can arise in this transitional age; peer pressures vs. adult authority; coping with conflicts in feelings
- Maintaining good family relations while striving for independence
- Identifying values and developing attitudes as a basis for making personal decisions which affect daily life; honesty, rules of behavior, cliques, and other common teenage situations

4. Dating as an important part of a teenager's social life

- Boy-girl relations; dating
- Behavior and responsibility in dating
- Controlling emotions leading to necking and petting, which can lead to problem situations
- Problems of premarital sex relations

5. Venereal diseases; the need for correct information

- What the venereal diseases are; how they are contracted, and their effect upon the body
- Need for medical care
- Untruths and superstitions connected with these diseases
- Dangers in indiscriminate experimenting with sexual relations

D. Illustrative Activities

- Discuss heredity; have students list factors they believe were inherited from each parent.
- Discuss the influences of both heredity and environment upon human development.

- Prepare panel discussions upon such topics as dating, going steady, developing a personal code of behavior, etc.
- Discuss adolescent physical changes; emphasize the varying rates among teenagers.
- Conduct informal discussions concerning such common teenage problems as getting along with parents, making friends, peer pressures, etc.
- Write personal reports on pertinent topics relative to teenage concerns.

IV. SENIOR HIGH

A. Introduction

Sex education may be placed in various areas of the curriculum, such as sciences, health and physical education, home economics, psychology, sociology, or sometimes in a special family problems or family relations course.

Teachers should not only impart accurate information, but should make every effort to develop appropriate student attitudes.

In cases where the responsibility for sex education is shared by several instructors, cooperative planning is necessary to avoid gaps and undue repetition.

Generally, sex education should be taught as a coeducational course since separation often stimulates unwholesome attitudes. Should opportunities arise to work with boys and girls separately, such as in physical education, there is often the advantage of a relaxed atmosphere and a greater freedom to discuss and ask questions relative to certain facets of the program.

A teacher should always attempt to answer every question honestly and in a straightforward manner. The ability of the teacher to communicate freely with the students is of prime importance. Students should be encouraged to ask questions, and the teacher should be prepared to help students find meaningful and honest answers. Student questions will result in excellent discussions and provide stimuli for projects and panels.

Teachers should be aware of the students' prior formal sex education program.

The high school curriculum lends itself to several routes, or avenues, any of which may be elected to disseminate sex information. Each program has its advantages and disadvantages from the standpoint of completeness, acceptability to a community, availability of curriculum time allotments, and qualified staff.

B. Content

1. A Semester Course in Family Living or Family Planning (Example)

- a. Human reproduction should be taught, or reviewed, to include the following:
 - (1) Physical sex structures and their functions
 - (2) Conception as to time, signs, tests, etc.
 - (3) Embryonic development and prenatal care
 - (4) Birth
 - (5) Post partum adjustment
- b. Growth and development
 - (1) Stages, ages of development; feelings of sex attraction
 - (2) Controlling the sex drive
- c. Exploring society's values
 - (1) Sex values and roles
 - (2) Responsibilities to self, future family, and society
 - (3) Creation of wholesome attitudes
 - (4) Alternative actions and their consequences
 - Premarital and extramarital sex experiences
 - Illegitimacy
 - Abortion
 - Sex deviancy
- d. Adolescents and the family
 - (1) Responsibilities of children to the parents, siblings, society
 - (2) Adolescent needs, duties, and obligations
- e. Dating and courtship
 - (1) Etiquette, limitations, behavior
 - (2) Choosing and arranging dates, activities
 - (3) Going steady versus free-lance dating
- f. Engagement
 - (1) Meaning of love and infatuation
 - (2) Factors constituting readiness for marriage
 - (3) Mate selection
- g. Marriage
 - (1) Elements of a well-adjusted family
 - (2) Responsibilities, problems, and pleasures of marriage
 - (3) Communication between mates; the rights and duties of mates
 - (4) Major sources of conflict—money handling; budgets; religion; employment; children; physical, intellectual, economic, social, cultural, and personality differences; in-laws

- (5) Sources of help—clergy, doctor, friends, parents, counselors
- (6) Basic needs of husband and wife—physical, mental, emotional, security
- (7) Attitudes and roles of sex with the marriage
- (8) Meeting the family crisis—illness, accident, birth, unemployment, finances, divorce, death

h. Planning for parenthood

- (1) Birth control
- (2) Responsibilities to children, mates, society
- (3) Roles, values, attitudes, adjustments as parents
- (4) Problems of raising children—finances, obligations, freedoms

Schools may find it more to their advantage to integrate or correlate family life information with other existing courses; for example, biology, health and physical education, homemaking, psychology, and sociology. Staff qualification and schedule variables will determine some directions the program will follow.

2. An Example of Integration

Family life information and values can be integrated into the school's academic pattern, such as into a health course in the following manner:

Health Course Outline

Unit I Introduction

Heredity
Environment
Embryology

Integration of Sex Education Concepts

- Film, *Heredity and Prenatal Development*
- Sperm and ovum characteristics
- Sex structures—functions and reasons
- Conception and pregnancy
- Birth anomalies, e.g., club foot, brain damage, P.K.U., mongoloid-syndrome, cleft palate

Health Course Outline

Unit II Your Personality

Design for Living
First Impressions
Your Appearance
Behavior
Emotions
Intelligence

Integration of Sex Education Concepts

- Puberty and adolescence
- Being accepted—family and society
- Acne, emotions, diet, and cleanliness
- Mental health—sex drives and sex roles with a healthy attitude
- Date planning, activities, and standards
- Love, engagement

Health Course Outline

Unit III Personality in Trouble

Emotions and Your Health
Mental Mechanisms
Mental Illnesses
Alcohol

Integration of Sex Education Concepts

- Choosing mates—physical, mental, and emotional consideration
- Marriage—problems, adjustments, responsibilities, divorce
- Homosexuality—acceptance of

Dangerous Drugs
Tobacco

Health Course Outline

Unit IV Control of Your Body
Sense Organs
The Nervous System
Nervous System Disorders
Endocrine Glands

Health Course Outline

Unit V The Body in Action
Bones and Muscles
Physical Fitness
Sports and Recreation
Fatigue and Sleep

Health Course Outline

Unit VI The Body Supply
System
Food
Digestion
Respiration
Heart, Vessels, and Blood
Excretory and Maintenance
of Tissues

Health Course Outline

Unit VII Diseases and Defenses
Infectious Diseases
Body Defense and Medical
Help
Chronic and Disabling Diseases
Public Health
You and Your Doctor

Health Course Outline

Unit VIII Safeguarding Your
Body
First Aid
Safety First
Safety on Wheels

sex roles

- Premarital sex—guilt conflicts, illegitimacy, abortion, morality
- Teen problems, alcohol, drugs, etc.
- Teenage marriage—maturity

Integration of Sex Education Concepts

- Mental retardation and brain damage
- Planning parenthood
- Sex glands and hormone balances
- Maturing, menstruation, menopause
- Effects of glands on emotions and activities
- Pregnancy tests

Integration of Sex Education Concepts

- Hernias—reasons, treatment, and kinds
- Variations and reasons for skeletal differences in sexes
- Weight control, muscle development, and physical activities
- Need of rest, proper diet, and physical activity

Integration of Sex Education Concepts

- Effect of emotions on respiration, circulation, excretion, and erectile tissues
- Prostate gland problems
- Pregnancy effects on respiration, circulation, and excretion
- Diet and pregnancy

Integration of Sex Education Concepts

- Film, *Innocent Parties*
- Venereal diseases—causes, symptoms, stages, and results
- Cancers of breast and reproductive system
- Need for medical supervision

Integration of Sex Education Concepts

- Show-off driving
- Parking perils
- Responsibilities of adulthood

LEARNING RESOURCES

In preparing this list of resources, the authors make no claim to have included all possible instructional materials, nor do they endorse each one as always appropriate for all schools. Careful evaluation should be made by the local school committee before using any of these. Some will be more desirable than others in helping to reach the goals established for the family living and personal growth program of a given school.

I. PRIMARY*

A. Books and Pamphlets for Students

1. *All About Babies*, Dorothy G. Johnson, Zondervan Publishing House, 1962.
2. *All About Eggs*, Millicent Selsam, W. R. Scott Company, 1952.
3. *A Baby Is Born*, M. I. Levine and J. H. Seligman, Golden Press, 1966.
4. *A Brand New Baby*, Margaret Stanger, Beacon Press, 1959.
5. *A Doctor Talks to 5-8 Year-Olds*, D. Z. Meilach, Budlong Press, 1966.
6. *Growing Up*, Karl DeSchweinitz, Macmillan, 1965.
7. *I'm Going To Have a Baby*, Laura Hobson, The John Day Company, 1967.
8. *Story of You*, E. A. and A. M. Cockefair, Milan Publications, 1955.
9. *The Wonderful Story of How You Were Born*, Sidonie M. Gruenberg, Doubleday, Revised edition, 1959.

B. Films and Filmstrips for Students

FILMS

1. *The Day Life Begins* (23 minutes, B & W), Carousel Films, Inc., 1501 Broadway, New York, New York 10036.
2. *Happy Little Hamsters* (31½ minutes, B & W and color), Henk Newenhouse, Inc., 1017 Longaker Boulevard, Northbrook, Illinois 60062.
3. *Human and Animal Beginnings* (13 minutes, color/sound), Henk Newenhouse, Inc., 1017 Longaker Boulevard, Northbrook, Illinois 60062.

FILMSTRIPS

1. *Little Citizens*, Cathedral Films, Inc., 2921 W. Alameda, Burbank, California 91505.

* Note: These materials not available from State Departments of Education or Health.

2. *Tales of Wise Old Owl*, Cathedral Films, Inc., 2921 W. Alameda, Burbank, California 91505.
3. *Characteristics of Boys and Girls*, Minnesota Mining and Manufacturing Company, 2501 Hudson Road, St. Paul, Minnesota.
4. *The Family*, Minnesota Mining and Manufacturing Company, 2501 Hudson Road, St. Paul, Minnesota.
5. *Family Health*, Minnesota Mining and Manufacturing Company, 2501 Hudson Road, St. Paul, Minnesota.
6. *Living Things from Living Things*, Minnesota Mining and Manufacturing Company, 2501 Hudson Road, St. Paul, Minnesota.
7. *How Babies Are Made*, Creative Scope, Inc., 509 Fifth Avenue, New York, New York. (Committee evaluation recommended before classroom use.)

C. Books, Pamphlets, and Films for Parents and Teachers

BOOKS

1. *Personal Problems of Children*, Elvajeon Hall. A bibliography of children's books to cover such problems as: I. The Problem of Appearance; II. The Problem of Physical Handicaps; III. The Problem of a New Child in the Family; IV. The Problem of Character and Personality Adjustments; and V. The Problem of a Broken Home.
2. *These Are Your Children*, Jenkins, Schacter and Bauer, Scott Foresman, 1966.

PAMPHLETS

1. *Parents' Responsibility and Facts Aren't Enough*, available from the American Medical Association, 535 N. Dearborn Street, Chicago, Illinois; or the National Education Association, 1201 16th Street, N.W., Washington, D.C.
2. *Sex and Our Society; Family Money Problems; New Facts About Birth Control; Building Your Marriage; and The Unmarried Mother*, available from Public Affairs Pamphlets, 381 Park Avenue, S., New York, New York 10016.
3. *Discussion Guides: Sex Education; Homosexuality; and Masturbation*, available from Sex Information and Education Council of the U.S., 1850 Broadway, New York, New York 10023.
4. *A Doctor Discusses the Preschool Child's Learning Process (And How Parents Can Help); A Doctor Talks to 5-8 Year-Olds; and A Doctor Talks to 9-12 Year-Olds*, available from the Budlong Press Company, 5428 N. Virginia Avenue, Chicago, Illinois 60625.

D. Films and Filmstrips for Parents and Teachers

Parent to Child on Sex (20 minutes, color/sound), Henk Newenhouse, Inc., 1017 Longaker Boulevard, Northbrook, Illinois 60062.

II. INTERMEDIATE

A. Books and Pamphlets for Students

1. *A Boy Grows Up*, Helen Manley, Social Health Association, 7803 Clayton Road, St. Louis, Missouri 63117.
2. *A Boy Today—A Man Tomorrow*, Optimist International, 4494 Lindell Boulevard, St. Louis, Missouri 63108, 1961.
3. *A Doctor Talks to 9-12 Year-Olds*, M. Cassidy Lerrigo, Budlong Press Company, 1967.
4. *A Story About You*, American Medical Association, 535 N. Dearborn Street, Chicago, Illinois 60610; or National Education Association, 1201 16th Street, N.W., Washington, D.C. 20036, 1966.
5. *Very Personally Yours* (Girls), Kimberly-Clark Corporation, Neenah, Wisconsin, 1961.

B. Films and Filmstrips for Students

FILMS

1. *Boy to Man* (16 minutes, color/sound), Henk Newenhouse, Inc., 1017 Longaker Boulevard, Northbrook, Illinois 60062.
2. *The Day Life Begins* (23 minutes, B & W), Carousel Films, Inc., 1501 Broadway, New York, New York 10036.
3. *Fertilization and Birth* (10 minutes, color/sound), Henk Newenhouse, Inc., 1017 Longaker Boulevard, Northbrook, Illinois 60062.
4. *Human and Animal Beginnings* (13 minutes, color/sound), Henk Newenhouse, Inc., 1017 Longaker Boulevard, Northbrook, Illinois 60062.
5. *Human Growth* (20 minutes, color/sound), Henk Newenhouse, Inc., 1017 Longaker Boulevard, Northbrook, Illinois 60062.
6. *It's Wonderful Being a Girl* (20 minutes, color/sound), Personal Products, Milltown, New Jersey.
7. *Story of Menstruation* (10 minutes, color/sound), Kimberly-Clark Corporation, Neenah, Wisconsin.
8. *World of a Girl* (20 minutes, color/sound), Modern Talking Picture Service, 3 East 54 Street, New York, New York.
9. *Fertilization and Birth*, Wexler Films, Los Angeles, California.

FILMSTRIPS

1. *Especially for Boys (6th Grade)*, Henk Newenhouse, Inc., 1017 Longaker Boulevard, Northbrook, Illinois 60062.
2. *Body Changes at Puberty*, Minnesota Mining and Manufacturing Company, 2501 Hudson Road, St. Paul, Minnesota.
3. *The Health and Happiness of the Family*, Minnesota Mining and Manufacturing Company, 2501 Hudson Road, St. Paul, Minnesota.
4. *Heredity*, Minnesota Mining and Manufacturing Company, 2501 Hudson Road, St. Paul, Minnesota.
5. *How Life Begins*, Minnesota Mining and Manufacturing Company, 2501 Hudson Road, St. Paul, Minnesota.
6. *Range of Family Characteristics*, Minnesota Mining and Manufacturing Company, 2501 Hudson Road, St. Paul, Minnesota.

C. Charts for Students

Birth Atlas, 5th edition, Maternity Center Association, 48 East 92nd Street, New York, New York 10028.

D. Books and Pamphlets for Parents and Teachers

1. *What Parents Ought To Know About Sex Education in Schools and Development of Healthy Sexuality* by Mary S. Calderone, M.D., 1966, available from American Association of Health, Physical Education and Recreation, National Education Association, 1201 16th Street, N.W., Washington, D.C. 20036.
2. *Discussion Guides: Sex Education; Homosexuality; Masturbation; and Premarital Sexual Standards*, available from Sex Information and Education Council of the U.S., 1850 Broadway, New York, New York 10023.
3. *Sex and Our Society; Family Money Problems; New Facts About Birth Control; Building Your Marriage; The Unmarried Mother*, available from Public Affairs Pamphlets, 381 Park Avenue, S., New York, New York 10016.

E. Films and Filmstrips for Parents and Teachers

Sex Education U.S.A., Guidance Associates, Pleasantville, New York 10570.

III. JUNIOR HIGH

A. Books, Pamphlets, Films, and Charts for Students

Books

1. *A Story About You*, Marion Lerrigo, American Medical

Association, 535 N. Dearborn Street, Chicago, Illinois 60610;
or National Education Association, 1201 16th Street, N.W.,
Washington, D.C. 20036.

2. *Love and Facts of Life*, Evelyn M. Duvall, Association Press,
New York, 1967.
3. *Modern Sex Education*, Cloyd and Jackson E. Juhan, 1967.
4. *What Teenagers Want To Know*, Florence Levinsohn, Budlong
Press, American Medical Association, 535 N. Dearborn
Street, Chicago, Illinois 60610.

PAMPHLETS

1. *Something Can Be Done About Acne; Why Girls Menstruate;
Miracle of Life*, American Medical Association, 535 N.
Dearborn Street, Chicago, Illinois 60610.
2. *Growing Up and Liking It*, Personal Products Company,
Education Department, Milltown, New Jersey 00850.
3. *World of a Girl*, Scott Paper Company, Philadelphia,
Pennsylvania 19113.

FILMS

1. *Human Growth*, Henk Newenhouse, Inc., 1017 Longaker
Boulevard, Northbrook, Illinois 60062.
2. *Human Heredity*, Henk Newenhouse, Inc., 1017 Longaker
Boulevard, Northbrook, Illinois 60062.
3. *Boy to Man*, Henk Newenhouse, Inc., 1017 Longaker
Boulevard, Northbrook, Illinois 60062.
4. *Girl to Woman*, Henk Newenhouse, Inc., 1017 Longaker
Boulevard, Northbrook, Illinois 60062.
5. *Innocent Party*, Calvin Productions, 1105 Truman Road,
Kansas City, Missouri.
6. *Dance Little Children*, Calvin Productions, 1105 Truman Road,
Kansas City, Missouri.
7. *Phoebe, Story of a Premarital Pregnancy*, McGraw-Hill
Films, 330 W. 42nd Street, New York, New York 10036.
8. *The Game*, McGraw-Hill Films, 330 W. 42nd Street,
New York, New York 10036.
9. *Barbara*, Interlude Films, P.O. Box 651, LaCrescenta,
California 91014.
10. *Individual Health and Family Life*, Minnesota Mining and
Manufacturing Company, 2501 Hudson Road, St. Paul,
Minnesota.
11. *The Human Reproduction System*, Minnesota Mining and
Manufacturing Company, 2501 Hudson Road, St. Paul,
Minnesota.
12. *Influence of Family Life*, Minnesota Mining and

Manufacturing Company, 2501 Hudson Road, St. Paul, Minnesota.

13. *Inherited and Acquired Characteristics*, Minnesota Mining and Manufacturing Company, 2501 Hudson Road, St. Paul, Minnesota.
14. *Developing Dating Criteria*, Minnesota Mining and Manufacturing Company, 2501 Hudson Road, St. Paul, Minnesota.

CHARTS

Birth Atlas, Maternity Center Association, 48 East 92nd Street, New York, New York 10028.

B. Written Material for Teachers

The Adolescent in Your Family, Your Teenage Children and Smoking, Children's Bureau Publication, Superintendent of Documents, Washington, D.C.

C. Discussion Guides

Sex Education, Homosexuality, Masturbation, Premarital Sexual Standards, Sex Information and Education Council of the U.S., 1850 Broadway, New York, New York 10023.

IV. SENIOR HIGH

A. Books and Pamphlets for Students

1. *Facts About Syphilis and Gonorrhea*, William Swartz, National Education Association, 1201 Sixteenth Street, N.W., Washington, D.C. 20036, 1965.
2. *How to Understand Sex*, Wayne J. Anderson, T. S. Denison and Company, Inc., Minneapolis, Minnesota, 1966.
3. *Living With Sex: The Student's Dilemma*, Richard F. Hettlinger, The Seabury Press, New York, 1966.
4. *Selected Readings in Education for Sexuality*, Sex Information and Education Council of the U.S., 1855 Broadway, New York, New York 10019.
5. *Understanding Sex*, Lester Kirkendall, Guidance Series #5-31, Science Research Associates, Chicago, Illinois, 1947.
6. *Understanding the Other Sex*, Kirkendall and Osborne, Guidance Series #5-838, Science Research Associates, Chicago, Illinois, 1955.

B. Films and Filmstrips for Students

FILMS

1. *Dance Little Children* (25 minutes, color/sound), Calvin Productions, 1105 Truman Road, Kansas City, Missouri.

2. *From Generation to Generation* (27 minutes, B & W and color), McGraw-Hill Films, 330 W. 42nd Street, New York, New York 10036.
3. *The Game* (28 minutes, B & W), McGraw-Hill Films, 330 W. 42nd Street, New York, New York 10036.
4. *Human Heredity* (18 minutes, color/sound), Henk Newenhouse, Inc., 1017 Longaker Boulevard, Northbrook, Illinois 60062.
5. *Human Reproduction* (New Edition, 20 minutes, B & W and color), McGraw-Hill Films, 330 W. 42nd Street, New York, New York 10036.
6. *Innocent Party* (18 minutes, color/sound), Calvin Productions, 1105 Truman Road, Kansas City, Missouri.
7. *Maternity Care: Labor and Delivery* (37 minutes, color/sound), American College of Obstetrics and Gynecology, 79 West Monroe Street, Room 400, Chicago, Illinois 60603.
8. *Phoebe: Story of a Premarital Pregnancy* (29 minutes, B & W), McGraw-Hill Films, 330 W. 42nd Street, New York, New York 10036.
9. *Psychological Differences Between the Sexes* (19 minutes, B & W and color), McGraw-Hill Films, 330 W. 42nd Street, New York, New York 10036.
10. *The Thread of Life* (59 minutes, color), Midwest Visual Education Service, 2204 Ingersoll, Des Moines, Iowa, or your local Northwestern Bell Telephone Business Office.

C. Charts for Students

Birth Atlas, 5th Edition, Maternity Center, 48 East 92nd Street, New York, New York 10028.

D. Books for Teachers

Teacher's Handbook and Venereal Disease Education, William F. Swartz, National Education Association, 1201 Sixteenth Street, N.W., Washington, D.C. 20036, 1965.

E. Articles for Parents and Teachers

1. "Sex Education, Family Living and Human Relations," Doris R. Schoel, *Journal of School Health*, Vol. XXXVIII, No. 3, March, 1968.
2. "Sex Education in the Public Elementary and High School Curriculum," Milton I. Levine, *Journal of School Health*, Vol. XXXVIII, No. 1, January, 1968.

F. Films and Filmstrips for Parents and Teachers

Sex Education U.S.A., Guidance Associates, Pleasantville,
New York 10570.

V. FOR THE TEACHER

A. Books and Pamphlets

1. *Child Development*, Brechenridge and Vincent, W. B. Saunders, New York, 1965.
2. *Childhood and Society*, Erik Erikson, Norton, New York, 1964.
3. *The Complete Book on Birth Control*, Alan F. Guttmacher, M.D., Ballantine Books, 1961.
4. *The First Nine Months of Life*, Geraldine Lux Flanagan, Simon and Schuster, New York, 1962.
5. *The Happy Child*, Irene M. Josselyn, Random House, New York, 1955.
6. *The Healthy Child*, Harold C. Stuart and Dane G. Prugh, Harvard University Press, Cambridge, Massachusetts, 1960.
7. *Living With Sex: A Student's Dilemma*, Richard F. Hettlinger, The Seabury Press, New York, 1966.
8. *Love and Sex in Plain Language*, Eric W. Johnson, J. B. Lippincott Company, Philadelphia, Revised Edition, 1967.
9. *Love and the Facts of Life*, Evelyn M. Duvall, Association Press, New York, 1967.
10. *The Terrible Choice: The Abortion Dilemma*, proceedings of the International Conference on Abortion sponsored by the Harvard Divinity School and the Joseph P. Kennedy, Jr., Foundation, Bantam Books, New York, 1968.
11. *The Unmarried Mother*, Ruth L. Butcher and Marion O. Robinson, Revised Edition, 1968, Public Affairs Pamphlet No. 282, 381 Park Avenue, S., New York, New York 10016.
12. *Unmarried Mothers*, Vincent Clark, Free Press of Glencoe, Inc., New York, 1961.
13. *What To Tell Your Children About Sex*, Child Study Association of America, 9 E. 89th Street, New York, New York 10028, 1958.
14. *Why Wait Till Marriage?* Evelyn M. Duvall, Association Press, New York, 1965.
15. *The Wonderful Story of How You Were Born*, Sidonie M. Gruenberg, illustrated by Hildegard Woodward, Doubleday, Revised Edition, 1959.
16. *Infant Care, Prenatal Care, Your Child One to Six, Your Child Six to Twelve, The Adolescent in Your Family*, Children's Bureau Publications, Superintendent of Documents, U.S. Government Printing Office, Washington, D.C. 20402.
17. *Facts Aren't Enough; Parents' Responsibility*, American Medical Association, 535 N. Dearborn Street, Chicago, Illinois

60610; or National Education Association, 1201 16th Street, N.W., Washington, D.C. 20036.

18. *A Doctor Discusses the Preschool Child's Learning Process (And How Parents Can Help); A Doctor Talks to 5-8 Year-Olds; A Doctor Talks to 9-12 Year-Olds; What Teenagers Want To Know; A Doctor's Marital Guide for Patients*, 2 editions, Catholic and non-Catholic; Budlong Press Company, 5428 N. Virginia Avenue, Chicago, Illinois 60625.
19. *New Facts About Birth Control; Building Your Marriage; The Unmarried Mother*; and *Sex and Our Society*, Dr. Lester A. Kirkendall, Public Affairs Pamphlets, 381 Park Avenue, S., New York, New York 10016.
20. *Sex Education; Homosexuality; Masturbation; Premarital Sexual Standards; Sexual Relations During Pregnancy and the Post-Delivery Period*, Sex Information and Education Council of the U.S., 1855 Broadway, New York, New York 10019.

B. Articles

1. "Comprehensive Services for Adolescent Unwed Mother," Mattie K. Wright, *Children*, Vol. 13, No. 5, September-October, 1966.
2. "The Pedagogy of Sex," William Simon and J. H. Gagnon, *The Saturday Review*, November 18, 1967.
3. "Sex Education: Blunt Answers to Tough Questions," Lester A. Kirkendall and James Lincoln Collier, *The Reader's Digest*, June, 1968.
4. "Teenage Mothers," Joan E. Morganthau, M.D., *The Journal of School Health*, Vol. XXXVII, No. 7, September, 1967.
5. "The Unmarried Fathers in Adoption Planning," Linda C. Burgess, *Children*, Vol. 15, No. 2, March-April, 1968.

C. Curriculum Guides

1. *A Curriculum Guide in Sex Education*, Helen Manley, State Publishing Company, Inc., St. Louis, Missouri 63136.
2. *Family Living Including Sex Education*, Board of Education of City of New York, Publication Sales Building, 110 Livingston Street, Brooklyn, New York 11201.
3. "Growth Patterns and Sex Education," *The Journal of School Health*, 1967, American School Health Association, Dr. A. O. DeWeese, 515 E. Main Street, Kent, Ohio 44240.
4. *Guidelines for Developing School Programs in Sex Education*, New Jersey State Department of Education, Trenton, New Jersey.
5. *Health Education—A Conceptual Approach to Curriculum*

Design, Minnesota Mining and Manufacturing Company,
St. Paul, Minnesota.

D. Journals and Newsletters

1. *Journal of School Health*, American School Health Association, 515 E. Main Street, Kent, Ohio 44240.
2. *Siacus Newsletter*, Sex Information and Education Council of the U.S., 1855 Broadway, New York, New York 10023.

E. Visual Aids

1. *Birth Atlas*, Fifth Edition, Maternity Center Association, 48 E. 92nd Street, New York, New York 10028.
2. *Sex Education U.S.A.—A Community Approach*, two-part filmstrip. Guidance Associates, Pleasantville, New York 10570.

F. Films—General

1. *Boy to Man* (16 minutes, color/sound), Henk Newenhouse, Inc., 1017 Longaker Boulevard, Northbrook, Illinois 60062.
2. *From Generation to Generation* (27 minutes, B & W and color), McGraw-Hill Films, 330 W. 42nd Street, New York, New York 10036.
3. *The Game* (28 minutes, B & W), McGraw-Hill Films, 330 W. 42nd Street, New York, New York 10036.
4. *Girl to Woman* (18 minutes, color/sound), Henk Newenhouse, Inc., 1017 Longaker Boulevard, Northbrook, Illinois 60062.
5. *How Babies Are Made* (32 slides), Color Slide Program Creative Scope, Inc., 509 Fifth Avenue, New York, New York 10017.
6. *Human and Animal Beginnings* (13 minutes, color/sound), Henk Newenhouse, Inc., 1017 Longaker Boulevard, Northbrook, Illinois 60062.
7. *Human Growth* (20 minutes, color/sound), Henk Newenhouse, Inc., 1017 Longaker Boulevard, Northbrook, Illinois 60062.
8. *Human Reproduction* (New edition, 20 minutes, B & W and color), McGraw-Hill Films, 330 W. 42nd Street, New York, New York 10036.
9. *Maternity Care: Medical Examinations During Pregnancy*, MN-9538a (28½ minutes, color/sound, 16mm); *Maternity Care: Personal Care During Pregnancy*, MN-9538b (39 minutes, color/sound, 16mm); *Maternity Care: Labor and Delivery*, MN-9538d (37¼ minutes, color/sound, 16mm). American College of Obstetricians and Gynecologists, 79 W. Monroe Street, Room 400, Chicago, Illinois 60603.
10. *Parent to Child About Sex* (20 minutes, color/sound), Henk

Newenhouse, Inc., 1017 Longaker Boulevard, Northbrook, Illinois 60062.

11. *Phoebe: Story of a Premarital Pregnancy* (29 minutes, B & W), Winner: Grand Prix Award, Montreal Film Festival. National Film Board of Canada. McGraw-Hill Films, 330 W. 42nd Street, New York, New York 10036.
12. *The Thread of Life* (59 minutes, color), Midwest Visual Education Service, 2204 Ingersoll, Des Moines, Iowa 50312; or your local Northwestern Bell Telephone Business Office.
13. *To Plan Your Family* (14 minutes, color/sound), Henk Newenhouse, Inc., 1017 Longaker Boulevard, Northbrook, Illinois 60062.
14. *Wonder of Reproduction* (12 minutes, B & W and color), Moody Educational Films, 12000 E. Washington Boulevard, Whittier, California 90606.

G. Films--Venereal Disease

1. *Dance Little Children* (25 minutes, color/sound), Calvin Productions, 1105 Truman Road, Kansas City, Missouri.
2. *Her Name Was Ellie; His Name Was Lyle* (29 minutes, B & W), Louis deRochemont Associates, Inc., 18 E. 48th Street, New York, New York 10017.
3. *The Innocent Party* (18 minutes, color/sound), Calvin Productions, 1105 Truman Road, Kansas City, Missouri.
4. *A Quarter Million Teenagers* (16 minutes, color/sound), Henk Newenhouse, Inc., 1017 Longaker Boulevard, Northbrook, Illinois 60062.

GLOSSARY OF TERMS

- Abdomen.** The part of the body between the chest and pelvis.
- Abortion.** A termination of the pregnancy at any time before the fetus has attained a stage where it can live independently, about 28 weeks gestation.
- Criminal abortion.** The termination of pregnancy without medical and legal justification.
- Spontaneous abortion.** The termination of a pre-viable conception through natural causes and without the aid of mechanical or medical agents.
- Therapeutic abortion.** The instrumental termination of pregnancy because of some grave maternal disease which would make continuation of gestation extremely hazardous to the mother.
- Abstinence.** Going without voluntarily.
- Acne.** An inflammatory disease of the sebaceous glands especially on the face, back, and neck—most common during adolescence.
- Adolescence.** The period of life from puberty to maturity.
- Adolescent.** A person in adolescence.
- Adultery.** Voluntary sexual intercourse between a married man and someone other than his wife or between a married woman and someone other than her husband.
- After-birth.** The structures cast off after the expulsion of the baby, including the membranes and the placenta with the attached umbilical cord.
- After-pains.** Those pains, more or less severe, after delivery, a result of contractions in the uterus in returning to its normal condition.
- Altruism.** Regard for or devotion to the interest of others.
- Amenorrhea.** Absence or suppression of the menstrual discharge.
- Amnion.** The most internal of the membranes, containing the waters which surround the baby in the uterus.
- Amniotic.** Pertaining to the amnion.
- Androgen.** A male hormone producing or stimulating male characteristics.
- Anomaly-anomalies.** Anything contrary to the general rule.
- Anovular.** Not accompanied by the discharge of an ovum.
- Antenatal.** Occurring or formed before birth.
- Antepartal.** Before labor and delivery or childbirth; prenatal.
- Anus.** Outer rectal opening.
- Areola.** The ring of pigment surrounding the nipple.
- Artificial insemination.** Artificial injection of semen into the uterine canal.
- Asexual.** Without sex, non-sexual.

Bag of waters. The membranes enclosing the liquid which surrounds the baby in the uterus.

Birth control. Control or limiting the number of children born, especially by preventing or lessening the frequency of pregnancy.

Birth rate. The ratio between births and individuals in a specific population and time, often expressed as number of live births per hundred or thousand population.

Bladder. The membrane sac in humans and animals that holds liquids—urinary bladder, gall bladder.

Born. Brought into existence — delivered from the mother.

Breasts. The upper front side of the chest; mammary glands.

Breech. Nates or buttocks; labor and delivery when buttocks are born first.

Breed. To produce offspring.

Breeding. The action or process of bearing or generating, the propagation of plants and animals.

Buttocks. The gluteal prominence, commonly called the “seat” or “rump.”

Castrate. To surgically remove testicles or ovaries.

Celibacy. State of not being married, abstention from intercourse, abstention by vow from marriage.

Celibate. One who lives in celibacy.

Cervix. The lower and narrow end of the uterus, between the opening and the body of the uterus.

Cesarean section. Delivery of the fetus (baby) by cutting through the abdominal wall and the wall of the uterus (womb).

Chaste. Innocent of unlawful intercourse.

Chastity. The quality of being chaste.

Chromosome. One of several small and more or less rod-shaped bodies which appear in the nucleus of the cell at the time of cell division and particularly in mitosis.

Circumcision. The removal of all or part of the prepuce or foreskin of the penis.

Cleft lip—hare lip. Congenital defect resulting from the faulty fusion of the upper lip leaving the sides separated from each other similar to the upper lip of a rabbit.

Cleft palate. Congenital opening in the roof of the mouth.

Clitoris. A small body of erectile tissue situated at the front part of the vulva. An organ of the female homologous with the penis of the male.

Club Foot. Congenital deformity of the foot.

Coitus. Sexual intercourse; copulation.

Conception. The impregnation of the female ovum (egg) by the sperm cell of the male, whence results a new being.

Condom. The rubber or membrane sheath worn over the penis during intercourse to avoid conception

Confinement. Term applied to childbirth and the lying-in period.

Congenital. Born with; existing from or from before birth, as, for example, congenital disease, a disease originating in the baby before birth.

Contraception. The prevention of conception or impregnation.

Contraction. Shortening of a muscle. Uterine contraction — shortening of the muscles of the uterus during labor — serves to expel the baby and after-birth.

Coprolalia. Psychiatry — a morbid desire to use sacrilegious or obscene words in ordinary conversation.

Copulation. Sexual intercourse between the sexes.

Delivery. 1. The expulsion of a child by the mother, or its extraction by the doctor. 2. The removal of a part from the body; as delivery of the placenta (after-birth).

Ectopic. An out of place gestation in which the fetus is out of its normal place in the cavity uterus. Most commonly occurs in the tube.

Egg. An animal reproductive body capable of developing into a new individual capable of independent existence.

Ejaculation. A sudden act of expulsion of semen.

Eliminate. To expel from the body.

Embryo. The product of conception in the uterus from the 3rd through the 5th week of gestation; after that length of time it is called the fetus.

Endocrine. Glands that produce secretions which go into the bloodstream for distribution through the body.

Endometrium. The mucous membrane which lines the uterus.

Epididymis. A long tube forming a mass of coils which may serve as a temporary storage space for sperm cells.

Erectile tissue. Tissue containing many blood vessels and when filled with blood becomes erect or rigid as the clitoris or penis.

Erection. The state of swelling, hardness, and stiffness observed in the penis and to a lesser extent in the clitoris of the female, generally due to sexual excitement.

Estrogen. A hormone secreted by the ovary and the placenta and producing or stimulating female characteristics.

Eugenics. The science which deals with the physical, moral, and intellectual improvement of the human race by careful and judicious mating for reproduction.

Fallopian tubes. Two canals extending from sides of the body of the uterus.

Fantasy. Daydream.

Feces. Body waste discharged through the anus — stool — bowel movement.

Female. An individual that bears young or produces eggs.

Femininity. The quality or nature of the female sex.

Fertility. The ability to produce offspring; power of reproduction.

Fertilize. The fusion (entering) of the spermatozoon with the ovum; it marks the beginning of pregnancy.

Fetus. The baby in the uterus from the end of the 5th week of gestation until birth.

Flagellum. A hairlike motile extension on the sperm cell.

Fontanel. The familiar "soft spot" just above a baby's forehead.

Foreskin. The fold of skin covering the end of the penis.

Gamete. A sexual cell; a mature germ cell, as an unfertilized egg or a mature sperm cell.

Gender. Sex.

Gene. A hereditary germinal factor in the chromosome which carries on a hereditary transmissible character.

Genetics. Relating to or determined by origin, development or casual antecedents of something.

Genitalia. The reproductive organs.

Gestation. The condition of pregnancy.

Glands. A group of cells that filter materials from the blood and change the materials for further usage or elimination.

Glans penis. End of the penis.

Gonad. A generic term referring to both male and female sex glands.

Gonorrhea. A specific contagious inflammation of the genital mucous membrane of either sex.

Graafian follicles or vesicles. Small round bodies in the ovaries, each containing an ovum.

Gravida. A pregnant woman.

Hatch. To produce young from an egg or chrysalis.

Heredity. The innate capacity of an individual to develop traits and characteristics possessed by its ancestors.

Homosexual. One sexually attracted to another of the same sex.

Hormone. A chemical substance produced in an organ, which is carried by the blood stream and excites a specific organ or activity.

Hymen. A membranous fold which partially or wholly covers the external opening of the vagina, especially in the virgin.

Hysterectomy. Removal of the uterus by surgery.

Illegitimacy. Born of unwed parents.

Implantation. The embedding of the fertilized ovum in the lining of the wall of the uterus.

Incest. Sexual intercourse between persons too closely related to contract a legal marriage.

Incubator. An apparatus by which eggs are hatched artificially. Also an apparatus for housing premature or sick babies.

Infant. A baby; a child under 2 years of age.

Infanticide. The killing of an infant.

Infertility. Unable to reproduce.

Insemination. Discharge of semen from the penis into the vagina during coitus.

Intercourse. Sexual act.

Intrauterine contraception. A device within the uterus to prevent conception.

Labia. Lips or liplike structures of the vulva. 1. **Majora**, the folds of skin containing fat and covered with hair which form each side of the vulva. 2. **Minora**, or folds of delicate skin inside of the labia majora.

Labor. Parturition; the series of processes by which the baby and afterbirth are expelled from the mother's body.

Lactation. The act or period of giving milk; the secretion of milk; the time or period of secreting milk.

Libido. The sexual drive, conscious or unconscious.

Love. An affection based on admiration or benevolence.

Male. The sex that begets young by performing the fertilizing function in generation by producing relatively small unusually motile sperm cells.

Mammals. Animals with mammary glands who suckle their young.

Marriage. The institution whereby men and women are joined in a special kind of social and legal dependence for the purpose of founding a home and maintaining a family.

Masculine. Having characteristics of the male.

Masturbation. Stimulation of the genital organs to orgasm achieved by manual or other bodily contact exclusive of sexual intercourse.

Mating. Pairing.

Maturation. The processes involved in growing.

Menarche. The establishment of the beginning of the menstrual periods.

Menopause. The period at which menstruation and ovulation cease; the "change of life." The ability to produce an offspring ends.

Menses. The periodic monthly discharge of blood from the uterus.

Menstruation. The cyclic, physiologic uterine bleeding which normally recurs at approximately 4-week intervals, in the absence of pregnancy, during the reproductive period.

Miscarriage. Synonymous with abortion. The term usually used by the layman; rarely used in medical parlance.

Mittelschmerz. Intermenstrual pain at time of ovulation.

Mongolism. Severe mental retardation with mental age less than three years.

Monogamy. Marriage with one person at a time.

Mons pubis. The portion of the body covering the bony prominence of the lower abdomen. Covered with hair in the adult.

Multiple births. Two or more babies born from one pregnancy.

Mutations. A sudden fundamental change in offspring producing new individuals basically unlike their parents.

Navel. The umbilicus.

Neonatal. Pertaining to the newborn, usually considered the first four weeks of life.

Nipple. The protuberance of a mammary gland through which the milk ducts open and from which milk is drawn.

Nocturnal emissions—wet dreams. Ejaculation of semen during sleep, wet dreams — seminal emissions.

Nude. Bare, without covering.

Obscene. Disgusting to the social senses.

Oral contraceptives. Contraceptive drugs taken by mouth.

Orgasm. A state of paroxysmal emotional excitement, especially that which occurs at the climax of sexual intercourse. In the male it is accompanied by ejaculation of semen.

Ovary. The sexual gland of the female in which the ova are developed. There are two ovaries, one in each side of the pelvis.

Ovulation. The growth and discharge of an ovum, usually associated with the menstrual period.

Ovum. Female reproductive cell (egg). (Plural is Ova.)

Parent. Mother or father.

Peer. One that is of equal standing with another individual.

Pelvis. The bony structure formed by the three hip bones. It serves as support for the spine and for joining with the limbs.

Penis. Male organ of copulation and urination. Part of external genitals.

Perineum. The area between the external genitals and the rectum.

Phallus. The penis.

P.K.U.—Phenylketonuria. A mental disease caused by the body's failure to oxidize an amino acid phenylalanine to tyrosine, perhaps because of a defective enzyme.

Placenta. The circular, flat structure holding the blood vessels in the pregnant uterus, forming the principal medium of exchange between the mother and the unborn baby.

Pornography. Depiction of erotic behavior in pictures or writing intended to cause sexual excitement.

Postpartal. After childbirth.

Pregnancy. The state of being with young or with child. The normal duration of pregnancy in the human female is 280 days or 10 lunar months or 9 calendar months.

Premature infant. An infant which weighs $5\frac{1}{2}$ pounds or less at birth or is less than 40 weeks gestation.

Prepuce. The fold of skin which covers the glans penis in the male.

Progesterone. Female hormone.

Prostate gland. A gland surrounding the upper portion of the male urethra and of the bladder secreting a thin fluid which forms part of semen and stimulates the motility of sperm.

Puberty. The age at which the reproductive organs become functionally active.

Pubic. Belonging to the pubis.

Rectum. The terminal part of the large intestine.

Reproduction. The process by which plants, animals, and humans give rise to offspring.

Rh factor. Factor in blood of about 85% of humans who are designated Rh+. The others are Rh- (Rh negative).

Scrotum. Double pouch containing testes and part of spermatic cord, part of male external genitals.

Sebaceous glands. Cells secreting oily substance.

Semen. The fluid containing the sperm cells.

Seminal vesicle. The organ which stores sperm cells.

Sperm. Male reproductive cell.

Spermatozoon. The male reproductive cell.

Sterile. Unable to reproduce.

Stillborn. Born without life; born dead.

Syphilis. A chronic contagious usually venereal and often congenital disease caused by a spirochete and characterized by a clinical course in three stages continued over many years.

Testes. Plural of testicle.

Testicle. One of the two glands contained in the scrotum. These glands produce the male sex cells.

Testosterone. Male hormone.

Tubal pregnancy. Imbedding of fertilized ova in fallopian tubes.

Twin. One of two offspring produced in same pregnancy.
Fraternal twins are developed from two ova.
Identical twins are developed from one ovum.

Umbilical cord. The structure, containing the blood vessels, that goes from the placenta to the baby.

Umbilicus. A small depression or scar in the abdominal wall where the umbilical cord was attached to the baby.

Ureter. The tube connecting the kidney to the urinary bladder.

Urethra. Canal for discharge of urine leading from the urinary bladder to the outside.

Urinate. The process of expelling the liquid waste from the urinary bladder.

Urine. The waste taken from the blood by the kidneys and sent to the urinary bladder.

Uterus. The hollow muscular organ in the female pelvis designed for the lodgment and nourishment of the baby during its development until birth.

Vagina (Latin, a sheath). The canal extending from the uterus to the outside female genitals.

Vas deferens. Excretory duct of the testes.

Venereal. Relating to sexual intercourse.

Virgin. A person who has not had sexual intercourse.

Vulva. The external genitals of the female.

Womb. Uterus.